Vulnerable Children and Adults

Government Management, Accountability and Performance

November 15, 2006

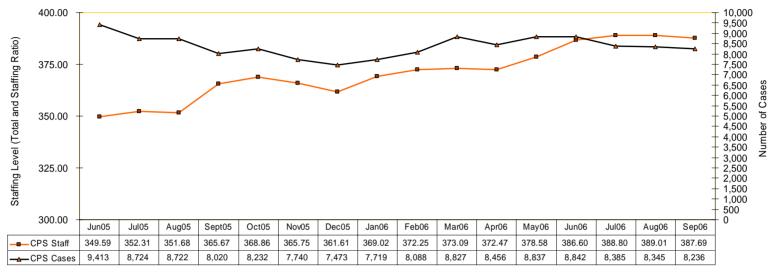
Children's Administration



Fiscal and Staffing Concerns

How many cases on average does a CPS Social Worker carry?

CPS Caseload and Staffing Levels

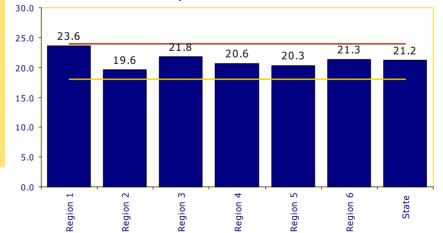


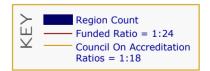
CA Decision Packages – How will they help?

Part 2 of staff phase-in for 30 day visits: to be completed in FY08.

 Expected to bring caseloads down and help us improve client outcomes.

Number of CPS Cases per CPS FTE: By Region September 2006

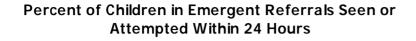


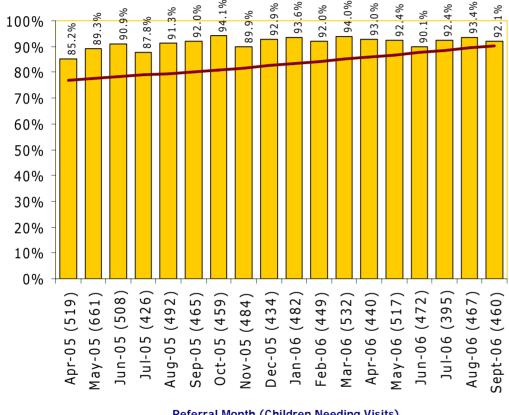


Funded ratio decreases to 19.7 by Jun08

Children will be safe from abuse and neglect

How quickly do we respond to emergent allegations of abuse or neglect?





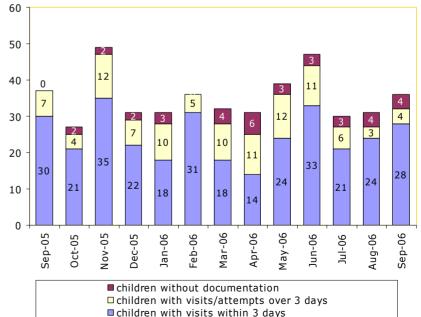
Referral Month (Children Needing Visits)

Percent Seen or Attempted Program Improvement Goal 2006 (90% 9/06)

Analysis:

- Visits are taking priority over documentation. therefore visits may not be immediately documented in CAMIS. Performance for the most current month may be significantly influenced by data lag.
- Month-to-month fluctuations in both CPS victim counts and CPS staffing levels impact response time performance.

Records Without Documentation of Timely Visits to Children in Emergency Referrals

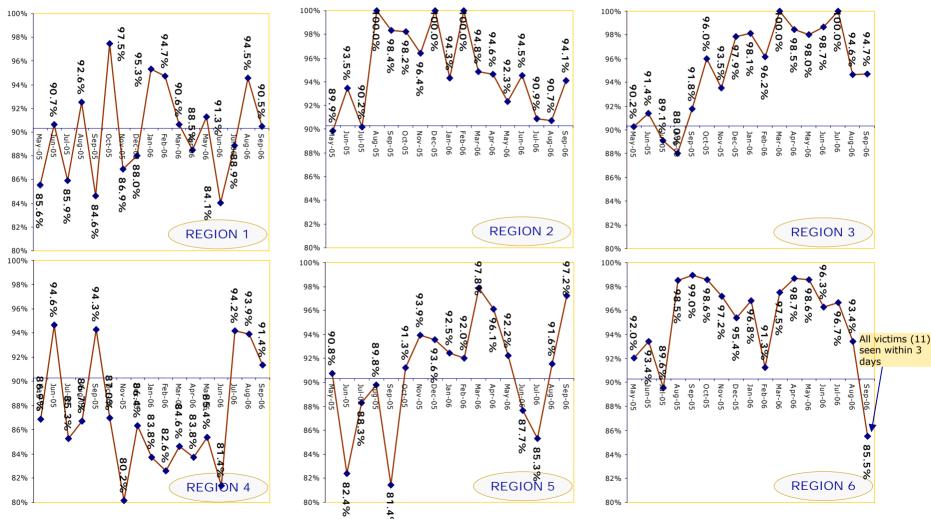


Children will be safe from abuse and neglect

Emergent referral response time: How are regions performing?

Percent of Children in Emergent Referrals Seen or Attempted Within 24 Hours

Sept 2006 Program Improvement Goal: 90%



DATA NOTES **SOURCE:** CAMIS download 10/06/06, 10/24/06 SER update. Victims in CPS referrals with a documented face-to-face visit or attempt within policy expectations. Excludes DLR-CPS. Lack of documentation reflects both incorrect documentation or no entry of visit documentation.

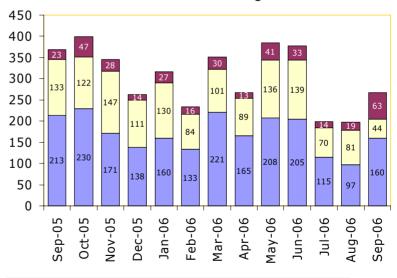
Children will be safe from abuse and neglect How quickly do we respond to non-emergent allegations of abuse or neglect?

Percent of Children in Non-Emergent Referrals Seen or Attempted Within 72-Hours 93.3% 89.9% 88.6% 88.2% % 6: 88.5% 100% 86.0% 5.3% 90.6 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% (3,044)(2,718)(2,919)(2,897)(2,480)(2,278)Feb-06 (2,552) Apr-06 (2,618) May-06 (3,268) Jun-06 (2,838) Jul-06 (2,392) Aug-06 (2,927) Mar-06 (3,072 Sept-06 (2,656) ec-05 (Aug-05 Sep-05 (Oct-05 Jan-06 Nov-05 Referral Month (Children Needing Visits) Within 72 Hours ——Program Improvement Goal: 80% (9/05) 90% (9/06)

Analysis:

- Visits are taking priority over documentation, therefore visits may not be immediately documented in CAMIS.
 Performance for the most current month may be significantly influenced by data lag.
- Month-to-month fluctuations in both CPS victim counts and CPS staffing levels impact response time performance.

Records Without Documentation of Timely Visits to Children in Non-Emergent Referrals



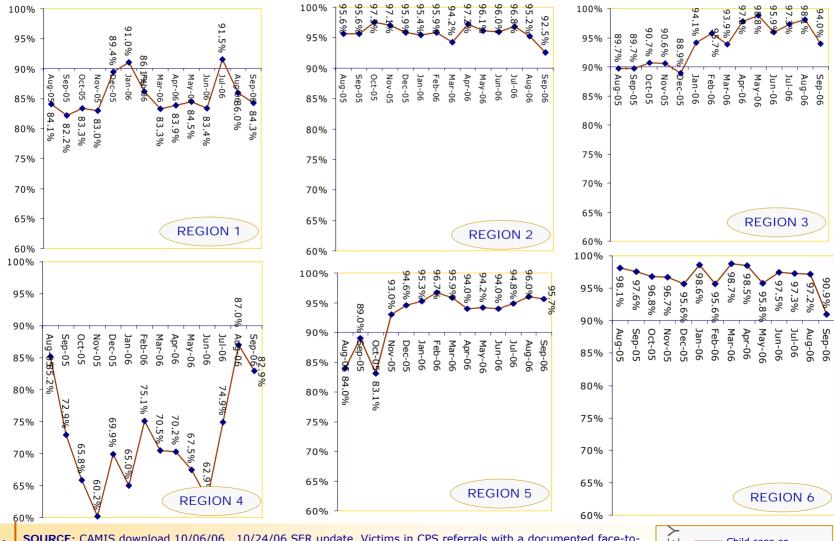
- # children without documented visits
- \square # of children with visits/attempts in > 7 days
- # of children with visits within 7 days

DATA NOTES **SOURCE:** CAMIS download 10/06/06, 10/24/06 SER update. Victims in CPS referrals with a documented face-to-face visit or attempt within policy expectations. Excludes DLR-CPS. Lack of documentation reflects both incorrect documentation or no entry of visit documentation.

Children will be safe from abuse and neglect

Non-emergent referral response time: How are regions performing?

Percent of Children in Non-Emergent Referrals Seen or Attempted Within 72 Hours Sept 2006 Program Improvement Goal: 90%



DATA NOTES **SOURCE:** CAMIS download 10/06/06, 10/24/06 SER update. Victims in CPS referrals with a documented face-to-face visit or attempt within policy expectations. Excludes DLR-CPS. Lack of documentation reflects both incorrect documentation or no entry of visit documentation.

Child seen or attempted to be seen

Children will be safe from abuse and neglect How do we improve our response to CPS referrals?

Analysis:

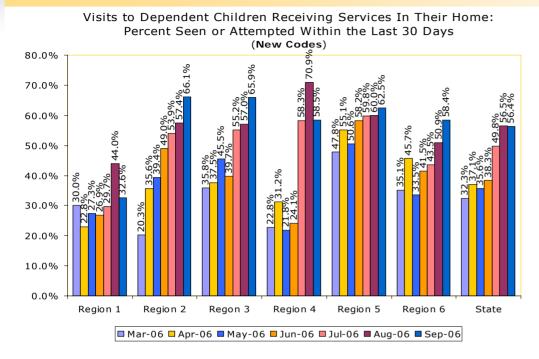
- Region 1 and Region 4 response time performance is being addressed through Region specific action plans. Non-emergent response time performance in both Regions is low primarily because of confusion about how to use CAMIS response time codes to document attempted visits.
 - > Region 1 The proportion of victims seen within 72 hours actually increased from August to September. However, the percent of victims with non-compliant attempts and the percent without CAMIS documentation increased in September. One office accounted for 61% of victims without compliant visits or attempts in Sept 06.
 - > Region 4 The proportion of victims seen within 72 hours has remained high since July. However, the percent with compliant attempts has decreased. One office accounted for 50% of victims without compliant visits or attempts in Sept 06.
- Region 5 emergent referral response time performance from June to August 2006 was hurt by CAMIS documentation problems. The Region has addressed this and September performance is above 90% for Sept06 on emergent and non-emergent referrals.
- Region 6 is reviewing performance on all CPS referrals the office with most non-compliant visits experienced a 64% increase in victims needing visits in September, compared to their prior quarter average (from 21 to 35 victims).
- CPS/CWS Redesign Update:
 - > Testing of the tools associated with the CPS/CWS redesign has occurred in 5 offices. (Moses Lake, Richland, Bellevue, Kent and Lynwood), resulting in several modifications to the tools.
 - > Information sessions on the redesign model have been held in each region, and in most offices around the state.
 - > Regions have submitted plans for how the redesign will be implemented in each office.
 - Offices will migrate to the new model October-December 2006.

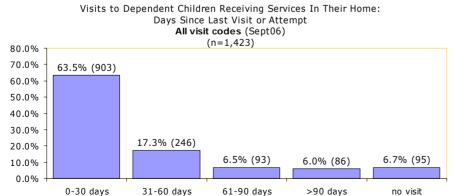
Actions	Who	Due Date
Action plans submitted for response time improvement in offices consistently falling below the performance target	Field Operations Director Regional Administrators	Completed (applies to Regions 1 and 4)
Rolling implementation of the CPS/CWS re-design model across the state.	Program and Practice Improvement Director Field Operations Director	1/31/07

Region 4 Workgroup Update

	ISSUE	DESCRIPTION	ACTION	TIMEFRAME	ACCOUNTABLE AGENCY
SHORT TERM ISSUES	Staffing	Reduction of Staff through rebalancing of caseloads across the state in FY06 contributed to increased caseload/workload CPS referrals distributed to other offices from OACCS contributed to increased caseload/workload	Staff have eliminated the backlog of re-distributed referrals	Completed	Region 4
		Difficulty hiring into vacant positions - Certification process & freeze during HRMS implementation led to hiring delays	CA owns certification, now working faster and smoother	On-going	CA
	Documentation	Due to staffing problems, priority placed on visiting children temporarily over CAMIS documentation	Region is filling vacancies and hiring new FTEs from 06 supplemental budget	On-going	Region 4
	Vehicle Availability	Insufficient cars available to Social Workers for client visits	Waiver being pursued on GA/DSHS monthly 1000 mile minimum usage rule CA will send request to DSHS Fleet Manager	Mid November 2006	CA/DSHS
			Decision by DSHS Fleet Manager	End of November 2006	
SYSTEMIC ISSUES	Staffing	High cost of living in King County	Assignment pay can be pursued for recruitment and retention issues for a job class based on geography – must be for all DSHS administrations DSHS will make decision whether to go forward with assignment pay.	End of December 2006	DSHS
	Documentation	Training and monitoring by management to improve performance	Regional action plan includes ongoing training, guidance and monitoring on the correct use of CAMIS codes	On-going	Region 4
	Court	Two courts in King County, schedules conflict, no assigned times for hearing, extended wait in court	Will be addressed by GMAP Office through Breakthrough Model	Mid November 2006	GMAP Office

Children will be safe from abuse and neglect Are dependent children receiving services in their home visited every 30 days?





Analysis:

- Staff efforts to visit children receiving services in their own homes, and to document their visits in CAMIS, have produced a significant improvement in performance during the first quarter of fiscal year 2007 (Jul-Sep 2006)
- 63% of all children have a documented 30 day visit or attempt within the last 45 days, and 67% were seen within the last 60 days (<u>new</u> <u>codes</u>)
- Documentation from <u>all</u> visit codes shows that some type of visit or attempt has been made for most children (80.8%) within the last 60 days
- Comparison of new visit code and all visit code documentation suggests that regional 30 day visits may be undercounted by as much as 13% to 19% when looking only at new visit codes
- A performance target for 30 day visits for children receiving services in their own homes will be set at the end of FY07

DATA NOTES **SOURCE:** CAMIS download 10/6/06, 10/24/06 SER Update. Data reflects children in an in-home dependency with visits within 30 days, including attempts, based on specific SER action code for 30 day visits. Point in time measure as of the first of the month. Policy originally effective October 1, 2005, revised to 12/21/05 plan for phase-in. New CAMIS SER code to track 30 day visits implemented February 2006.

documented

GMAP: Vulnerable Children and Adults

Children will be safe from abuse and neglect

How can we improve the frequency of visits every 30 days?

Analysis:

- Regions have submitted and are implementing plans to improve documentation for in-home placements and for 30 day visits.
- Some progress has been made correcting documentation for in-home dependencies:
 - > 52.6% of in-home dependency placements in September have been open over 6 months, down from 60% in June.
 - A new headquarters audit of suspect CAMIS in-home dependency records from the 10/06 CAMIS download found that 59 of 268 records still need some type of correction (the dependency has been dismissed or the child is in out-of-home placement) while another 45 had already been corrected in CAMIS by regional staff.
 - > Lists of problem in-home dependency records were sent to each region for correction on 10/17/06.
- Feedback from regional staff indicate that 30 day visit documentation continues to be confused with pre-existing out-of-home visit codes, requiring ongoing efforts to educate and coach managers, supervisors and social workers.
- Full CA implementation of 30 day visits for all children is expected to occur ahead of the implementation of a new federal requirement for 30 day visits.
 - > Fed appropriation will be approximately \$629,000.
 - > Funds can be used for staff recruitment, retention, training and for making use of technology.

Actions	Who	Due Date
Improve accuracy of performance data by reviewing and correcting 30 day visit documentation	Regional Administrators	Efforts are ongoing
Audit placements documented in CAMIS as in-home dependencies to verify their legal and placement status	Finance and Operations Support Division Director	Completed 10/27/06
Correct in-home dependency documentation in CAMIS for problem records identified by Decision Support Unit audit	Field Operations Director Regional Administrators	11/14/06

CA Decision Packages – How will they help?

Part 2 of staff phase-in for 30 day visits: to be completed in FY08.

• Expected to bring caseloads down and help us improve client outcomes.

Children will be safe from abuse and neglect What percent of children were not abused or neglected again?

Recurrence Rates at 6, 12, and 24 Months After Initial Victimization

Initial referral		Percent revictimized		
received	Total N	6-Month	12-Month	24-Month
Jan-Jun 2001	3275	13.0%	14.9%	17.5%
Jul-Dec 2001	2487	13.1%	15.8%	18.9%
Jan-Jun 2002	2921	12.4%	14.3%	17.2%
Jul-Dec 2002	2561	12.7%	14.9%	17.8%
Jan-Jun 2003	2885	13.1%	15.4%	18.6%
Jul-Dec 2003	2901	11.8%	13.6%	16.1%
Jan-Jun 2004	3223	11.2%	13.7%	16.7%
Jul-Dec 2004	3103	12.2%	14.4%	17.3%
Jan-Jun 2005	3316	11.6%	14.4%	16.0%
Jul-Dec 2005	3220	9.5%	10.7%	13.0%

Estimated rates

POLICY NOTES

¹ CPS Response Time Policy Implementation:

- Emergent Referrals within 24 hours: 4/29/05
- Non-emergent Referrals within 72 hours: 8/8/05

DATA NOTES

Because workers have 90 days to complete their investigations and enter findings into CAMIS, six-month rates for the latest entry cohort period can be accurately determined only for initial referrals received through December 2005 (allowing for a period of six months for revictimization plus 90 days for investigation and data entry). 12 and 24 month rates are accurately known up to the Jan-Jun 2005 and Jan-Jun 2004 cohorts, respectively. Shaded numbers for later cohorts are estimates that will be revised with later, more complete data.

- An analysis of the effects of the 24/72 hour response¹ to referrals indicates that children are safer when seen sooner.
- A series of multivariate analyses demonstrated that the decline in recurrence was highly likely to be the result of seeing children more quickly rather than changes in other factors.
- The analysis showed:
 - A marked decline in the rates of recurrence of child abuse for nonemergent referrals and a similar though smaller effect for emergent referrals.
 - Combining both types of referrals, a 25 percent decline in the six-months recurrence rate.
 - A significant association between lower rates of recurrence and faster response times, true even before implementation of the new policies.
 - No significant differences in recurrence rates for referrals granted exceptions to the 24 and 72 hour policies, indicating that the appropriate use of exceptions does not compromise child safety.
 - A similar pattern of lower re-referral rates, whether referrals are founded, inclusive, or unfounded.

Children will be safe from abuse and neglect How can we reduce the risk of repeat child abuse and neglect?

Analysis:

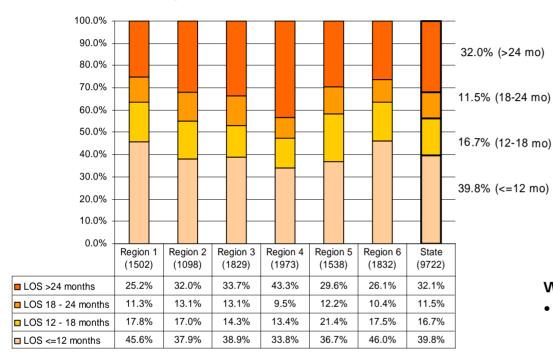
The following initiatives are expected, over time, to have a positive impact on recurrence:

- CPS/CWS redesign due to specialized CPS investigation case loads, faster response times, more thorough and timely investigations and assessment of risk, earlier engagement of families in services.
- Increased focus and training on child neglect, along with the implementation of the new neglect legislation.
- Increased access to evidence based programs such as Parent Child Interaction Therapy (PCIT), Functional Family Therapy (FFT), Incredible Years, Cognitive Behavior Therapy and Trauma-Based Cognitive Behavior Therapy, leading to more effective reduction of risk.

Actions	Who	Due Date
Rolling implementation of the CPS/CWS re-design model across the state.	Program and Practice Improvement Director, Field Operations Director	1/31/07
Implement new neglect legislation by providing additional training in every region on family engagement in neglect cases.	Program and Practice Improvement Director	12/31/06
Implement new neglect legislation by providing training to all staff on the "GAIN -SS" mental health and substance abuse screening tool.	Program and Practice Improvement Director	12/31/06
Implement new neglect legislation by identifying evidence-based service array needed to reduce risk of recurrence due to neglect.	Program and Practice Improvement Director	12/31/06

Provide stable, nurturing, permanent placements Snapshot of Children in Placement by Length-of-Stay

All Children in Placement by Length-of-Stay: September 2006 (N=9,772)



CA Decision Packages – How will they help?

Expansion of Kinship Support provides:

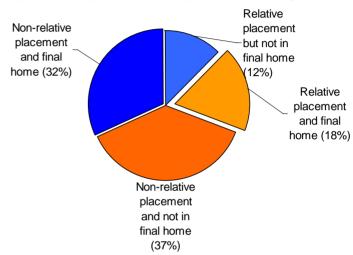
- Expanded definition of relative, to include 2nd cousins, relatives of siblings and people with whom the child has a relationship
- Funding for more relative searches
- Funding for more home studies
- Increased support services including respite services

DATA NOTES

CAMIS data: all children in an open episode without a completed permanency plan (excludes children in guardianships), in CA custody as of CAMIS download (Oct 6, 2006). Length-of-stay calculated from original placement date (OPD) to end of month (source: nopenpl.xls)

Who are the children in care over 2 years?

• 44% (1,379/3,136) of them are legally free for adoption. They are in these placement categories:



Why are adoptions delayed?

- Moving children toward permanency as quickly as possible requires:
 - Concurrent planning
 - Effective recruitment of families wanting to adopt
 - Timely home study and licensing completion for parents interested in adoption
 - Ongoing management review of performance on permanency planning progress
 - A legal process with minimal delays
- Risks to adoption finalization that tend to increase with the time in care include:
 - Changes in the assigned Social Worker
 - Deterioration in the child's functioning
 - Caregiver ambivalence about adoption
 - Support for the adoption plan from relatives